

Department of Public Health and Social Services
Division of Environmental Health
Food Establishment Inspection Report

Page 1 of 7

INSPECTION RSN	TYPE	GRADE	INSPECTION DATE	ESTABLISHMENT NAME
Regular	<input checked="" type="checkbox"/>	65	1 / 17 / 2018	TOP ISLAND RESTAURANT
Follow-up			TIME IN	TIME OUT
Complaint	<input checked="" type="checkbox"/>	RATING	10:10 AM	2:50 PM
Investigation		D	SANITARY PERMIT NO.	PERMIT HOLDER
Other:			170001704	XU, BIZI, AND ZHANG, HUAYING
ESTABLISHMENT TYPE	AREA	TELEPHONE	No. of Risk Factor/Intervention Violations	RISK CATEGORY
RESTAURANT	7	646-1818	8	5
			No. of Repeat Risk Factor/Intervention Violations	
			0	

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance (IN, OUT, N/O, N/A) for each numbered item. Mark "X" in appropriate box for COS and/or R.

IN = In compliance OUT = Not in compliance N/O = Not observed N/A = Not applicable COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit points

Compliance Status	COS	R	PTS	Compliance Status	COS	R	PTS
Supervision				Potentially Hazardous Food (TCS Food)			
1 IN OUT			6	16 IN OUT N/A N/O			6
Person in charge present, demonstrates knowledge, and performs duties		X		17 IN OUT N/A N/O			6
Employee Health				18 IN OUT N/A N/O			6
2 IN OUT			6	19 IN OUT N/A N/O			6
Management awareness, policy present				20 IN OUT N/A			6
3 IN OUT			6	21 IN OUT N/A N/O			6
Proper use of reporting, restriction & exclusion				Proper cooking time and temperatures			
Good Hygienic Practices				Proper reheating procedures for hot holding			
4 IN OUT N/A N/O			6	Proper cooling time and temperatures			
Proper eating, tasting, drinking, betelnut, or tobacco use				Proper hot holding temperatures			
5 IN OUT N/A N/O			6	Proper cold holding temperatures			
No discharge from eyes, nose, and mouth				Proper date marking and disposition			
Preventing Contamination by Hands				Consumer Advisory			
6 IN OUT N/A N/O			6	22 IN OUT N/A			6
Hands clean and properly washed				Consumer Advisory provided for raw or undercooked foods			
7 IN OUT N/A N/O			6	Highly Susceptible Populations			
No bare hand contact with ready-to-eat foods or approved alternate method properly followed				23 IN OUT N/A			6
8 IN OUT			6	Pasteurized foods used; prohibited foods not offered			
Adequate handwashing facilities supplied & accessible				Chemical			
Approved Source				24 IN OUT N/A			6
9 IN OUT			6	Food additives: approved and properly used			
Food obtained from approved source				25 IN OUT N/A			6
10 IN OUT N/A N/A			6	Toxic substances properly identified, stored, used			
Food received at proper temperature				Conformance with Approved Procedures			
11 IN OUT			6	26 IN OUT N/A			6
Food in good condition, safe, and unadulterated				Compliance with variance, specialized process, and HACCP plan			
12 IN OUT N/A N/O			6				
Required records available: shellstock tags, parasite destruction							
Protection from Contamination							
13 IN OUT N/A I			6				
Food separated and protected							
14 IN OUT N/A I			6				
Food contact surfaces: cleaned & sanitized							
15 IN OUT			6				
Proper disposition of returned, previously served, reconditioned, and unsafe food							

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health interventions are control measures to prevent foodborne illness or injury.

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

Mark "X" in box if numbered item is not in compliance and/or if COS and/or R. COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit points

Compliance Status	COS	R	PTS	Compliance Status	COS	R	PTS
Safe Food and Water				Proper Use of Utensils			
27			1	40 X			1
Pasteurized eggs used where required				41 X			1
28			2	Utensils, equipment and linens: properly stored, dried, handled			
Water and ice from approved source				42			1
29			1	Single-use/single-service articles: properly stored, used			
Variance obtained for specialized processing methods				43			1
Food Temperature Control				Gloves used properly			
30			1	Utensils, Equipment and Vending			
Proper cooling methods used; adequate equipment for temperature control				44			1
31			1	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used			
Plant food properly cooked for hot holding				45 X			1
32 X			1	Warewashing facilities: installed, maintained, used, test strips			
Approved thawing methods used				46 X			1
33 X			1	Nonfood-contact surfaces clean			
Thermometer provided and accurate				Physical Facilities			
Food Identification				47			2
34 X			1	Hot & cold water available, adequate pressure			
Food properly labeled; original container				48 X			2
Prevention of Food Contamination				Plumbing installed; proper backflow devices			
35 X			2	49			2
Insects, rodents, and animals not present I I				Sewage and wastewater properly disposed			
36 X			1	50 X			2
Contamination prevented during food preparation, storage & display				Toilet facilities: properly constructed, supplied, & cleaned			
37 X			1	51			2
Personal cleanliness I I				Garbage/refuse properly disposed; facilities maintained			
38 X			1	52 X			1
Wiping cloths: properly used and stored I I				Physical facilities installed, maintained, and clean I N I			
39			1	53			1
Washing fruits and vegetables				Adequate ventilation and lighting; designated areas use			
Documents and Placards				54 X			2
I have read and understand the above violation(s), and I am aware of the corrective measures that shall be taken.				Sanitary Permit, Health Certificates valid and posted			

Person in Charge (Print and Sign) R. ORIONDO Date: 1-17-2018

DEH Inspector (Print and Sign) L. NAVARRO Follow-up (Circle one): YES NO Follow-up Date

Department of Public Health and Social Services
Division of Environmental Health

Food Establishment Inspection Report

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ESTABLISHMENT NAME TOP ISLAND RESTAURANT		LOCATION (Address) LOT 5172-D BLK 2 LOT 8, TAMUNING
INSPECTION DATE 01 / 17 / 2018	SANITARY PERMIT NO. 170001704	PERMIT HOLDER XU, QU ZI AND ZHANG, HUAYING

TEMPERATURE OBSERVATIONS

Item/Location	Temperature (° F)	Item/Location	Temperature (° F)
RAW SMELLED EGGS / KITCHEN COUNTER	84.0		
COOKED SHRIMP / PREP TABLE CHILLER	46.5		
COOKED BEEF / PREP TABLE CHILLER	36.5		
COOKED CHICKEN / PREP TABLE CHILLER	43.5		
DICED HAM / PREP TABLE CHILLER	44.5		
FRIED TOFU / PREP TABLE CHILLER	32.0		
FRIED CHICKEN / UPRIGHT CHILLER	34.0		
STEAMED RICE / WARMER	176.0		

ITEM NO.	OBSERVATIONS AND CORRECTIVE ACTIONS	CORRECT BY DATE
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Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.

	A REGULAR INSPECTION WAS CONDUCTED TODAY IN RESPONSE TO COMPLAINT NO. 18-008B REGARDING POSSIBLE PEST INFESTATION IN THE FACILITY. EVIDENCE WAS FOUND TO SUPPORT THE COMPLAINT. THE FOLLOWING VIOLATIONS WERE OBSERVED:	
1	PERSON-IN-CHARGE (PIC) WITH A MANAGER'S CERTIFICATION WAS NOT PRESENT. A COS: PIC WITH A MANAGER'S CERTIFICATION ARRIVED WITHIN 30 MINUTES OF THE INSPECTION. A DESIGNATED PIC SHALL BE PRESENT DURING ALL HOURS OF OPERATION AND MUST DEMONSTRATE KNOWLEDGE OF THE CODE TO ENSURE PROPER FOOD SAFETY REQUIREMENTS ARE BEING FOLLOWED.	COS
2	NO HEALTH EMPLOYEE POLICY IN PLACE. AN EMPLOYEE HEALTH POLICY SHALL BE INSTITUTED TO ENSURE TRAINING ON PROPER EXCLUSION AND RESTRICTION OF SICK EMPLOYEES.	
6.	EMPLOYEES DID NOT WASH HANDS WHEN CHANGING TASKS. ONE EMPLOYEE WAS OBSERVED WASHING HIS HANDS IN THE THREE COMPARTMENT SINK. HANDS SHALL BE CLEANED AND PROPERLY WASHED IN A DESIGNATED HAND WASHING SINK AFTER CHANGING TASKS TO PREVENT CONTAMINATION OF FOOD BY HANDS.	

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections.

Person in Charge (Print and Sign)

DEH Inspector (Print and Sign)

L. NAVARRO

Date:

Date:

17-2018
1/17/18

R. ORIONDO

Department of Public Health and Social Services
Division of Environmental Health

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ESTABLISHMENT NAME TOP ISLAND RESTAURANT		LOCATION (Address) LOT 5172-D BLK 2 LOT 8, TAMUNING
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8	NO HAND SOAP PROVIDED IN HANDWASHING SINK IN THE KITCHEN. NO SIGNAGE PROVIDED FOR ALL HANDWASHING SINKS. HANDWASHING FACILITIES SHALL BE PROPERLY MAINTAINED WITH NECESSARY SUPPLIES AND SIGNAGES TO ENSURE PROPER HANDWASHING PRACTICES BY EMPLOYEES.	
13	MULTIPLE FOOD ITEMS FOUND UNCOVERED IN THE CHILLERS AND FREEZERS. AN OPENED BAG OF CARROTS FOUND STORED UNDER RAW FISH AND MEAT, IN THE UPRIGHT CHILLER. BAGS OF COOKED CHICKEN COOKED FOUND STORED WITH RAW PORK AND BEEF IN THE DEEP FREEZER. FOOD SHALL BE PROPERLY SEPARATED AND PROTECTED TO ENSURE CROSS-CONTAMINATION IS PREVENTED.	
14	CUTTING BOARD BEING USED FOR FOOD PREPARATION WERE FOUND WITH DARK STAINS AND DEEP CUT MARKS. CONTAINER USED TO STORE WATER USED FOR COOKING FOUND WITH DARK STAINS. FOOD CONTACT SURFACES SHALL BE CLEANED PROPERLY TO PREVENT CROSS-CONTAMINATION.	
20	SEVERAL FOOD ITEMS STORED IN THE PREP TABLE CHILLER DID NOT MEET REQUIRED INTERNAL TEMPERATURE FOR COLD HOLDING. RAW SHELLED EGGS WERE FOUND STORED ON THE KITCHEN COUNTER AND HAD AN INTERNAL TEMPERATURE OF 84°F. POTENTIALLY HAZARDOUS FOOD (PHF) / TIME AND TEMPERATURE CONTROL FOR SAFETY (TCS) FOOD SHALL BE KEPT AT INTERNAL TEMPERATURE OF 41°F OR BELOW FOR COLD HOLDING TO LIMIT PATHOGEN GROWTH AND/OR TOXIN FORMATION.	
21	VARIOUS FOOD KEPT IN THE CHILLERS FOR MORE THAN 24 HOURS DID NOT HAVE DATE MARKING. PHF/TCS FOOD KEPT IN REFRIGERATION FOR MORE THAN 24 HOURS SHALL BE PROPERLY DATE MARKED TO ENSURE TIMELY DISPOSITION.	
25	UNAPPROVED GEL BAIT WAS FOUND IN THE FRONT COUNTER, A BOTTLE OF PAID WAS	

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Person in Charge (Print and Sign) 	Date: 1-17-2018
DEH Inspector (Print and Sign) R. ORIONDO	Date: 01/17/18

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Division of Environmental Health

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ESTABLISHMENT NAME TOP ISLAND RESTAURANT		LOCATION (Address) LOT 572-D BLK 2 LOT 8, TAMUNING
INSPECTION DATE 01, 17, 2018	SANITARY PERMIT NO. 170001704	PERMIT HOLDER XU, QI ZI AND ZHANG, HUAYING

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	FOUND ON THE LOWER SHELF OF THE KITCHEN COUNTER STORED WITH SINGLE USE ARTICLES ^{PLATES} . TOXIC SUBSTANCES SHALL BE PROPERLY IDENTIFIED AND STORED TO PREVENT CROSS-CONTAMINATION OF FOOD.	
32	RAW CHICKEN AND BEEF TRIPE FOUND BEING IMPROPERLY THAWED IN THE WAREWASHING SINK. (FOOD FOUND DIRECTLY ON THE SINK WITHOUT WATER AGITATION) FOOD SHALL BE PROPERLY THAWED TO LIMIT PATHOGEN GROWTH.	
33	FOOD THERMOMETER NOT PROVIDED. FOOD THERMOMETERS SHALL BE PROVIDED AND USED TO FACILITATE MONITORING OF INTERNAL TEMPERATURES OF FOOD.	
34	NUMEROUS FOOD ITEMS ON THE KITCHEN COUNTERS, IN CHILLERS, AND FREEZERS, NOT IN ORIGINAL CONTAINER, WERE NOT LABELED. FOOD NOT IN ORIGINAL CONTAINER SHALL BE PROPERLY LABELED TO FACILITATE CORRECT IDENTIFICATION.	
35	LIVE ROACHES OF DIFFERENT SIZES FOUND THROUGHOUT THE KITCHEN AND FRONT COUNTER AREA. DEAD ROACHES OF DIFFERENT SIZES FOUND INSIDE THE FREEZER, CHILLERS, THROUGHOUT THE KITCHEN, FRONT COUNTER AND DRY STORAGE AREA. GUTTER OPENINGS FOUND AROUND PIPES IN KITCHEN, DINING AREA AND RESTROOMS, FLOOR DRAIN IN WOMEN'S RESTROOM FOUND UNCOVERED. ACCORDING TO PIC, NO PEST CONTROL SERVICES HAVE BEEN CONTRACTED; THEY APPLY PESTICIDES ON THEIR OWN. BASED ON THIS OBSERVATION, IT APPEARS THAT AN ACTIVE ROACH INFESTATION IS PRESENT, AND IS CONSIDERED AN IMMINENT HEALTH HAZARD. PESTS SHALL NOT BE PRESENT OR SHALL BE CONTROLLED TO PREVENT CONTAMINATION OF FOOD, UTENSILS, AND EQUIPMENT.	
36	SEVERAL FOOD ITEMS FOUND STORED DIRECTLY ON THE FLOOR AND WITH PERSONAL ITEMS SUCH AS HAIR BRUSH, SLIPPERS, AND TOYS IN THE KITCHEN & DRY STORAGE AREA.	

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in further regulatory actions. If seeking to appeal the result of this inspection, a written request for hearing must be submitted to the Director before the indicated correction date.

Person in Charge (Print and Sign)

DEH Inspector (Print and Sign)

L. NARRO *[Signature]* **R. ORIONDO** *[Signature]*

1-17-2018

Date:

Date: 01/17/18

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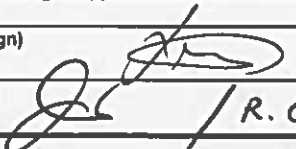
ESTABLISHMENT NAME TOP ISLAND RESTAURANT		LOCATION (Address) LOT 5172-D BLK 2 LOT 8, TAMUNING
INSPECTION DATE 01, 17, 2018	SANITARY PERMIT NO. 170001704	PERMIT HOLDER XU, GU ZI AND ZHANG, HUAYING

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37	ONE EMPLOYEE FOUND NOT WEARING HAIR RESTRAINT <u>As was</u> AND A WEARING A BRACELET WHILE PREPARING FOOD IN THE KITCHEN. HAIR RESTRAINTS SHALL BE WORN AND WEARING OF JEWELRY SHALL BE PROHIBITED WHILE HANDLING FOOD TO PREVENT PHYSICAL CONTAMINATION.	
38	<u>STORED</u> WIPING CLOTHS FOUND DIRECTLY <u>ON</u> KITCHEN COUNTERS AND IN A BUCKET WITH WEAK SANITIZING SOLUTION. WIPING CLOTHS SHALL BE STORED IN A PROPERLY DILUTED SANITIZING SOLUTION IN BETWEEN USE TO PREVENT CROSS - CONTAMINATION.	
40	RICE SCOOPERS FOUND BEING STORED IN LUKE WARM WATER IN THE FRONT COUNTER. IN-USE UTENSILS SHALL BE PROPERLY STORED TO PREVENT CROSS CONTAMINATION.	
41	SPOONS AND FORKS IMPROPERLY STORED (I.E. EXPOSED) TO CONTAMINATION) IN THE FRONT COUNTER. UTENSILS SHALL BE PROPERLY STORED TO PREVENT CONTAMINATION WITH DUST & PESTS.	
45	NO TEST STRIPS PROVIDED FOR THE WAREWASHING SINK. TEST STRIPS SHALL BE PROVIDED TO ENSURE PROPER DILUTION OF SANITIZING SOLUTION.	
46	CEILING OF CHILLER FOUND WITH ICE BUILD-UP. STOVE TOPS, COUNTERTOPS, EQUIPMENT DOORS AND SURFACES FOUND WITH DARK STAINS AND GREASE BUILD-UP. NON-FOOD CONTACT SURFACES SHALL BE KEPT CLEAN TO PREVENT CROSS-CONTAMINATION.	
48	NO SERVICE SINK PROVIDED FOR MOP. SERVICE SINK SHALL BE PROVIDED TO ENSURE PROPER CLEANING OF MOPS AND DISPOSAL OF WASTE WATER.	
50	UNCOVERED TRASH RECEPTACLE FOUND IN WOMEN'S RESTROOM.	

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in further regulatory actions. If seeking to appeal the result of this inspection, a written request for hearing must be submitted to the Director before the indicated correction date.

Person In Charge (Print and Sign)  R. ORONO	Date: 1-17-2018
DEH Inspector (Print and Sign) L. NARRO	Date: 01/17/18

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	TRASH RECEPTACLES SHALL BE PROVIDED WITH TIGHT FITTING COVER TO PREVENT DEVELOPMENT OF ODORS AND ATTRACTANT TO PESTS.	
52	UNUSED ARTICLES FOUND ON TOP OF THE CHILLERS COLLECTING DUST, IN THE KITCHEN AREA. FLOORS FOUND UNCLEAN WITH FOOD DEBRIS, GREASE BUILD-UP AND DIRT IN THE KITCHEN AND DRY STORAGE AREA. PHYSICAL FACILITIES SHALL BE KEPT CLEAN AND IN GOOD REPAIR TO PREVENT HARBORAGE OF PESTS.	
54	OWNER, XU QI ZHI, DID NOT HAVE A VALID HEALTH CERTIFICATE. HEALTH CERTIFICATE SHALL BE VALID TO ENSURE FOOD HANDLERS ARE FREE FROM INFECTIOUS DISEASE. PHOTOS AND VIDEOS OF THE VIOLATIONS WERE TAKEN. RETRIEVED PLACARD "A" ALSO AND SANITARY PERMIT. SANITARY PERMIT SHALL BE SUSPENDED UNTIL ALL CITED VIOLATIONS HAVE BEEN CORRECTED, AND THE FOLLOWING ADDITIONAL REQUIREMENTS, PURSUANT TO SECTION 8-102.10, ARE MET TO ADDRESS ROACH INFESTATION: 1. WRITTEN DOCUMENTATION FROM ESTABLISHMENT'S PRIMARY PEST CONTROL COMPANY (PCC) REGARDING THE SERVICE PROVIDED TO INCLUDE NAME OF PESTICIDE USED; NUMBERS OF BAITS, TRAPS OR OTHER METHODS USED; LOCATION OF APPLICATION; OBSERVATIONS OF EACH SERVICE PROVIDED; AND ANY OTHER RELEVANT INFORMATION. 2. WRITTEN DOCUMENTATION FROM THE PCC THAT NO PEST ACTIVITY WAS OBSERVED FOR THREE CONSECUTIVE DAYS. 3. SEAL ALL OPENINGS TO THE FACILITY TO PREVENT ENTRY OF PESTS. 4. PROVIDE A WRITTEN CLEANING SCHEDULE TO INCLUDE AREAS TO BE CLEANED;	

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in further regulatory actions. If seeking to appeal the result of this inspection, a written request for hearing must be submitted to the Director before the indicated correction date.

Person In Charge (Print and Sign) L. NAVARRO	DEH Inspector (Print and Sign) R. ORONDO	Date: 1-17-2018
		Date: 01/17/18

Food Establishment Inspection Report

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AND HOW OFTEN IT WILL BE CONDUCTED.

POSTED "D" PLACARD NO. 00983 AND NOTICE OF CLOSURE PLACARD.

A REINSTATEMENT FEE OF \$100.00 SHALL BE PAID TO THE DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES UPON SUCCESSFUL COMPLETION OF A FOLLOW-UP INSPECTION.

ISSUED NOTICE OF CLOSURE LETTER AND REINSPECTION REQUEST FORM.

DISCUSSED THIS INSPECTION REPORT WITH OWNER, XU QI ZHI.

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in further regulatory actions. If seeking to appeal the result of this inspection, a written request for hearing must be submitted to the Director before the indicated correction date.

Person in Charge (Print and Sign)

DEH Inspector (Print and Sign)

L. N. NAKO

R. ORIONDO *Am*

Date:

1-17-2018 Date:

Date: _____

01/17/18

White: DPHSS/DEH Yellow: Food Establishment



GOVERNMENT OF GUAM
DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
DIPATTAMENTON SALUT PUPBLEKO YAN SETBISION SUSIAT



EDDIE BAZA CALVO
GOVERNOR

RAY TENORIO
LIEUTENANT GOVERNOR

JAMES W. GILLAN
DIRECTOR

LEO G. CASIL
DEPUTY DIRECTOR

Date: 01/17/2018

TOP ISLAND RESTAURANT
Name of Establishment

As a result of this inspection your establishment received a:

☐ LETTER OF WARNING

(Demerit/Grade Points)

Once you have corrected all violations cited on your establishment's inspection report, you must provide us a written request for re-inspection to include a description of the corrective measures that you have implemented. If we do not receive a written re-inspection request from you, we will conduct a follow-up inspection after ten (10) calendar days from the official receipt of this notice to ensure that corrective measures have been taken.

Failure to correct violations may result in the closure of your establishment pursuant to section 21109(b) of 10GCA, Chapter 21.

☒ NOTICE OF CLOSURE

65/D
(Demerit/Grade Points)

Once you have corrected all violations cited on your establishment's inspection report, you must provide us a written request for re-inspection to include a description of the corrective measures that you have implemented. Unlike an establishment who has received a letter of warning, an establishment shall remain closed unless a written request for re-inspection is made. Under 10 GCA Ch. 21 §21109(b), suspension without prior hearing may be imposed until the violation is corrected. You may also request a hearing to the Division of Environmental Health within five (5) calendar days of the date of this notice. When a hearing is requested following a suspension without prior hearing, it shall be discretionary with the Director as to whether the suspension shall be continued pending the hearing.

We look forward to working closely with you as partners in promoting health and sanitary practices on Guam. If you need further assistance, you can reach us at 735-7221 or (fax) 734-5556. Si Yu'us Ma'ase.

Sincerely,
James W. Gillan
for JAMES W. GILLAN
Director

Issued By: L. NAYARRO / R. ORIONDO
Name of EPHO

Received By: [Signature]
Establishment Representative

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www.dphss.guam.gov • Ph: 1.671.735.7102 • Fax: 1.671.473.5910